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** CONTINUING DATA ***** _____ None DM					
** FOREIGN APPLICATIONS ***** _____ None DM					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/22/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> Allowance <input checked="" type="checkbox"/> DM Examiner's Signature Initials		STATE OR COUNTRY ID	SHEETS DRAWING 11	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 6
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FILING FEE RECEIVED 1118	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT. No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		